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DALLAS, TX 7	5201-2980		:			(Depositor's name)
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	R A	TTORNEY DOCKET NO.	CONFIRMATION NO.
10/611,651 06/30/2003 Robert B. O'Hara JR. 062891.2702 2025 TITLE OF INVENTION: DIRECTED ASSOCIATION MECHANISM IN WIRELESS NETWORK ENVIRONMENTS						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE F	EE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$0	\$0	\$755	02/04/2009
EXAM	INER	ART UNIT	CLASS-SUBCLASS	٦		
CHAN, SAI MING		2416	370-338000	_		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
AASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Cisco Systems, Inc.  San Jose, California  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government						
la. The following fee(s) are submitted:    Sissue Fee			D. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02-0384 (enclose an extra copy of this form).			
a. Applicant claims	us (from status Indicated s SMALL ENVITY statu	is. See 37 CFR 1.27.	XX b. Applicant is no lo	nger claiming SMALL	ENTITY status. See 37 CI	FR 1.27(g)(2).
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Authorized Signature			Date			
Typed or printed name	Bradlew P.	Williams	Registration No. 40,227			
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) in application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and ubmitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete his form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. local 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.  Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.						
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